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Ambassador James Keith Pandemic Influenza Senior Leaders Symposium Imperial Hotel, Kuala Lumpur August 12, 2008

Yang Berbahagia Lieutenant General Dato' Pahlawan Dr Sulaiman bin Abdullah, Director General of Malaysian Armed Forces Health Services, Yang Berbahagia Tan Sri Dato' Seri Dr Haji Mohd Ismail Merican, Director-General of Health Malaysia, Lieutenant General John F. Goodman, Commander, U.S. Marine Corps Forces Pacific, Mr. Douglas Wallace, Director, Center for Excellence in Disaster Management and Humanitarian Assistance, Distinguished Guests, Ladies and Gentlemen. *Selamat Pagi* and welcome to Kuala Lumpur and to the *Pandemic Influenza Senior Leaders Symposium*. It is a great honor for me to address you at this prestigious event and I would like to take this privilege to thank the Government of Malaysia for its efforts in cohosting this conference of senior leaders from around the region. I am also delighted that so many of you were able to attend this event.

There are three kinds of influenza we are dealing with, namely, seasonal flu, avian flu also known as H5N1, which affects birds, and human pandemic influenza, which is transmitted through contact with poultry. We can't be certain that the H5N1 virus will spark a pandemic, but we can be sure that pandemics will happen. The three human influenza pandemics that occurred in the 20th century each resulted in illness in approximately 30 percent of the world's population and death in 0.2 percent to 2 percent of those infected. The SARS experience of 2003 affected about 8,000 people over a six month period in thirty countries on six continents. The cost to the Asia-Pacific region was approximately \$40 billion USD. Once SARS emerged from rural China, it spread to five countries within 24 hours. The SARS epidemic has taught us some useful lessons - the importance of vigilant surveillance systems, transparent communication, well-thought out plans and close cooperation within and between governments.

This gathering of senior leaders and policy makers from Asia-Pacific nations is timely in providing an excellent opportunity to meet and address issues pertaining to preparing for pandemic influenza. I am pleased to see that issues of medical surveillance, international communication and response, and most importantly, cooperation between governmental, non-governmental and international organizations will be discussed. The presence of twenty countries, 6 governmental organizations and 6 NGOs highlights that effective responses to a pandemic will take a variety of organizations working in concert to defeat this virus. This seminar presents us with an opportunity to cooperate and coordinate, as well as to share and communicate our ideas and efforts in preparing for a pandemic influenza in the Asia Pacific region. Indeed, all hands are needed in responding to this threat.

In order to address these challenges we must have a better understanding of what is happening in and around us. New technologies have improved our ability to better collect and process information and coordinate our response to pandemic issues. We are now better positioned to confront the implications of the disease with better surveillance systems, faster communication programs, improved data-sharing, and increased publichealth preparedness. The World Health Organization recommends strengthening local capacity for surveillance and response at a country level in order to detect, verify and respond to outbreaks and to improve interagency collaboration. In May 2008, the Center for Excellence in Disaster Management and Humanitarian Assistance (COE) in collaboration with the Ministry of Health Malaysia organized a regional lab and epidemiological review pandemic influenza workshop in Kuala Lumpur attended by military and health practitioners from 16 countries. The participants worked on technical protocols to diagnose influenza viruses so that they could share information about the virus reliably and quickly. This workshop is one installment of the capacity building efforts to improve detection and surveillance of pandemic virus and further enhanced current surveillance systems prior to the start of a pandemic. Essentially we must know what the problem is before we can fix it.

Communication will be critical to effectively responding to a pandemic. From the SARS experience of 2003, we learned an effective means of prevention is to proactively keep people better informed on the causes of the disease, the modes of transmission and the actions to be taken. The time to implement a public awareness campaign is now before a pandemic. By providing the public with prompt and reliable information on general health issues now, we can improve the overall health of our citizens and develop health habits that will better inoculate people against similar viruses. Additionally, an active dialogue between government officials, medical professionals and communities at large will only serve to build confidence, deflate fear and improve response during any viral outbreak. The time to do this is now; it is far more difficult to initiate this dialogue post outbreak. Part of that message to communicate is the government's plan to respond to human pandemic influenza.

Indeed, this conference will prove to be a very useful and vital forum for bringing each of us together to communicate and share our individual countries' initiatives and plans to address pandemic outbreak. As you may be aware, all countries need a written preparedness plan addressing containment when a pandemic occurs. Malaysia has implemented a good national influenza pandemic preparedness plan (NIPPP) and I understand that the Director-General of Health Malaysia, Tan Sri Dato' Seri Dr Haji Mohd Ismail Merican will share with us the NIPPP later. Being a comprehensive plan, the NIPPP reflects a strong example of interagency cooperation. This coincides with the theme of this conference - improving interagency cooperation. There has been progress, but there is more work to be accomplished. Viruses know no borders, respect no laws, and spare no one. To combat this threat we must reduce any barriers to our international cooperation in combating pandemic outbreak. Partnerships within and across governments are vital to facilitating cooperation, building trust and confidence, and gaining results. A coordinated approach among all international health partners improves the security and safety of all nations, and protects their economies. No one agency or

country has the resources or authorities to defeat these pandemic threats. All hands are needed to make a difference.

Like no other time in human history, we are linked through cheaper, faster, and more accessible transportation and communications. While there are clear economic benefits in this connectivity, goods are not the only things transferred. This connectivity allows us to cooperate more closely in addressing our problems. This forum and fora like it are very important venues to advance our cooperative efforts.

Before I conclude, it is important to commend the extensive work being done by WHO, FAO, NAMRU, WFP, USAID engaged in the world's battle against pandemic influenza. In closing, I'd like to thank the Center for Excellence in Disaster Management and Humanitarian Assistance, and the Malaysian Armed Forces Health Services for hosting this prestigious symposium. I would also wish to take this opportunity to thank the Ministry of Health for supporting this event by sending high level representatives to participate at the conference. I'm sure you all will find this a worthwhile event with ample opportunities for networking and sharing your thoughts in the battle against pandemic influenza. Preparedness and long-term capacity building requires collaboration on the international, regional, national and community levels and as this conference demonstrates, global and interagency cooperation are essential to global success. The world is presenting us with new and complicated problems, but events like this offer us an opportunity to work together in resolving them.

Terima Kasih and Thank You.